2500 Columbia Avenue P. O. Box 3001 Lancaster, PA 17804-9001 Fax: (717) 398-6121

Armstrong World Industries, Inc.

RECEIVED CENTRAL FAX CENTER



JUL 0 7 2005

To:	USPTO	From: Douglas E. Winters
Fax	703-872-9306	Phone: (717) 396-5842
Date:	7/7/2005	Fax: (717) 396-6121
Re:	Power of Attorney	Pages: 2 (including cover sheet)

• Comments:

Attached is a Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address correcting information supplied to you regarding our customer Number Upload Spreadsheet.

Do not hesitate to contact me with any questions.

IF YOU HAVE A PROBLEM WITH THIS TRANSMISSION, PLEASE CALL 717/396-5842

THIS MESSAGE IS INTENDED ONLY FOR THE USE OF THE INDIVIOUAL OR ENTITY TO WHICH IT IS ADDRESSED AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED, CONFIDENTIAL AND EXEMPT FROM DISCLOSURE UNDER APPLICABLE LAW. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, OR THE EMPLOYEE OR AGENT RESPONSIBLE FOR DELIVERING THE MESSAGE TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE. THANK YOU.

Doc Code: Under the Paperwork Reduction Act of 1895, no persons are required to respe		PTO/53/82 (09-04 ed for use through 11/30/2008, OMB 0551-003! k Office: U.S. DEPARTMENT OF COMMERCE unless it displays a valid OMB control number
1	Application Number	09/777,040
REVOCATION OF POWER OF	Filing Date	February 5, 2001
ATTORNEY WITH	First Named Inventor	Sigal et al.
NEW POWER OF ATTORNEY	Art Unit	1774
AND CHANGE	Examiner Name	Ferguson, Lawrence D.
OF CORRESPONDENCE ADDRESS	Attorney Docket Number	0019

I hereby revoke all previous powers of attorney given in the above-identified application:										
A Power of Attorney is submitted herewith. OR										
I hereby appoint the practitioners associated with the Customer Number: 00112										
Please change the correspondence address for the above-identified application to:										
IZI Z	The address associated with Customer Number:									
OR										
Firm or individu	al Name		ı			•				
Address					•	_				
City				State		ZIP				
Country										
Telephone				Fax		<u></u>				
I am the: Applicant/Inventor										
Stat	Assignee of record of the entire interest. See 37 CFR 3.71 Statement under 37CFR 3.73(b) is enclosed. (Form PTO/SB/96)									
Signature	α	SIGNATURE O	f Applicant or Assig	nee of Rec	ord					
Name	Donglas & Winters									
Date	July 7, 2005			Telephone 717-396-4070						
NOTE: Signatures of all the inventors or assigness of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.										
Total of 1 forms are submitted.										

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending on the individual seas. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patenta, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9189 and select option 2.